X

STATE OF SOUTH CAROLINA

(Caption of Case)

223180

BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

Example: Application for a Class C Charter Centil at The John Doe dba Doe's Limo

MAR 8 1 2019

	MAR 8 1 2019	TRANSPORTATION COVER SHEET
202	monding Fassenger, T.W. T. W. June of the same	DOCKET 2009-129-7 Taxi NUMBER: 2009-120-T Charter
		If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.
Sub	mitted by: 341 Wonthington and 29588	Telephone: (843) 222-9048 Fax: Other:
NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.		
NATURE OF ACTION (Check all that apply)		
	Application - Class C Taxi	Request to Amend Scope of Authority
	Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)
	Application Class C Charter Bus	Request to Amend Passenger Limit
	Application - Class C Non-Emergency	Request RECEIVED
	Application - Class E Household Goods	☐ Exhibit
	Application - Class E Hazardous Waste	Late-Filed Exhib MAR 3 1 2010
	Application	Letter PSC SC CLERK'S OFFICE
	Request for Extension to Comply with Order	Proposed Order
	Request for Order Granting Authority to Obtain Certificate Public Convenience and Necessity to Be Rescinded	of Publisher's Affidavit
	Request for Cancellation of Certificate	Reservation Letter
	Request for Suspension	Response
	Request for Reinstatement	Return to Petition
	Request for Name Change on Certificate	Other:

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

CLASS C AMENDMENT FORM File the original with: Mail or fax a copy to: **Public Service Commission of South Carolina** S.C. Office of Regulatory Staff Clerk's Office **Transportation Department Motor Carrier Matters** 1401 Main Street, Sulte 900 P.O. Box 11649 Columbia, S.C. 29201 Columbia, S.C. 29211 (803) 737-0578 (803) 896 - 5100 FAX (803) 737-0815 FAX (803) 896-5199 DATE: March 39 3010 MAR 3 1 2010 I have the following Certificate: Class C Taxi # 8113-A Class C Charter # 8112-A Class C Non-Emergency #____ Please consider this as my request for the following amendment(s) to my Certificate: Name Change __ DBA: ____ (Current Name) (Current DBA if applicable) _____ DBA: _____ (New DBA if applicable) (New Name) Scope of Authority From: ____ To: (Current Scope) (New Scope) Passenger Limit From:____ ____ To: _____ (Current Limit Number) (New Limit Number)

Name & DBA if DBA is applicable)

(Street and/or Mailing Address)

(City, State, Zip Code)

(Signature)

(Telephone Number) (Title) Owner, President, etc.